FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden hours

per response..1

SEC USE ONLY Prefix Serial

DATE RECEIVED

			1180	1717
Name of Offering ([] check if this is an amendment and name has changed, a VALQUEST PARTNERS BATON]		• ,		آ دُ ک
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505	[X] <u>Rule 50</u>	<u>6</u> [] Section	on 4(6) [] ULOE	
Type of Filing: [X] New Filing [] Amendment				
A. BASIC IDENTIFIC	CATION D	ATA		
1. Enter the information requested about the issuer			02050)316
Name of Issuer ([] check if this is an amendment and name has chang VALQUEST PARTNERS BATON ROUGE, L.P.	ed, and indi	cate change	2.)	PROCESS
_				P AUG 1 4 200
Address of Executive Offices (Number and Street, City, State, Zi 4600 Greenville Ave., Suite 194, Dallas, Texas 75206	ip Code)	Telepho 214-265	one Number (Inclu 3-9576	ding Ard HOMSON FINANCIAL
Address of Principal (Number and Street, City, State, Zip Code) (if different from Executive Offices)		Telepho	one Number (Inclu	ding Area Code)
Brief Description of Business To construct, develop, operate and sell the project on th	at certain n	ronerty.		
Type of Business Organization [] corporation [X] limited partnership, already formed [] business trust [] limited partnership, to be formed		er (please sp	necify): [X] Actual	[] Estimated
Actual or Estimated Date of Incorporation or Organization:	[0][5]	[02]	[12] Trottaur	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Pother foreign jurisdiction) [T] [X] GENERAL INSTRUCTIONS Federal:	ostal Service	abbreviati	on for State; CN for	Canada; FN for
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulat	ion D or Section	4(6), 17 CFR 23	0.501 et seq. or 15 U.S.C. 77	¹ d(6).
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A of the date it is received by the SEC at the address given below or, if received at that address after the date address.				
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	20549.			
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only repeated and any material changes from the information previously supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the April 1985 of the contains a supplied in Parts A and B. Part E and the Contains a supplied in Parts A and B. Part E and the Contains a supplied in Parts A and B. Part E and the Contains a supplied in Parts A and B. Part E and the Contains A and B. Part E and Contains A and B. Part E and Contains A and B. Part E and Contains A and Contain	ort the name of the	issuer and offer	ing, any changes thereto, the i	, , , , ,

Page 1 of 10

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity security	ies of the issuer
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	·
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Manag	ing ———
Full Name (Last name first, if individual)	
ValQuest Equity Partners, a general partnership	
Business or Residence Address (Number and Street, City, State, Zip Code)	
4600 Greenville Ave., Suite 194, Dallas, Texas 75206	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Woods, Stephen E., Partner	
Business or Residence Address (Number and Street, City, State, Zip Code)	
4600 Greenville Ave., Suite 194, Dallas, Texas 75206	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Woods, James B., Jr., Partner	<u> </u>
Business or Residence Address (Number and Street, City, State, Zip Code)	
4600 Greenville Ave., Suite 194, Dallas, Texas 75206	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

Check B	ox(es) that A	pply:	[]	Promoter	[]	Beneficial Owner	[]	Execut	ive Officer	[]	Director	[]	General a Managin	
Full Nan	ne (Last name	first, if	indivi	dual)						-			<u></u>	
Business	or Residence	Addres	s (Nun	nber and St	reet,	City, State, Zip Coo	ie)		<i>".</i>					
Check B	ox(es) that A	pply:	[]	Promoter	[]	Beneficial Owner	[]	Execut	ive Officer	[]	Director	[]	General a	
Full Nam	e (Last name	first, if	indivi	dual)										
Business	or Residence	Address	s (Nun	nber and St	reet,	City, State, Zip Coc	ie)							
	-			(Use blan	ık she	eet, or copy and use	addit	ional cop	ies of this s	heet, as	necessary	₍)		
						B. INFORMAT	ION A	BOUT (OFFERING	G			·	
1. Has th	ne issuer sold,	or does	the is:	suer intend	to sel	ll, to non-accredited	l inves	tors in th	is offering?	? ;	• • • • • • • •		·· Yes	No [X]
				Answ	ver al	so in Appendix, Co	lumn 2	, if filing	under UL	OE.				
2. What	is the minimu	ım inves	tment	that will be	acce	pted from any indi	vidual	?					·· \$ <u>20,0</u>	<u>000</u>
3. Does t	he offering p	ermit jo	int ow	nership of a	sing	le unit?						••••	·· Yes	No []
commiss person to states, lis	ion or similar o be listed is a st the name of	remund n associ the bro	eratior iated p oker or	n for solicita person or ag dealer. If r	ition (ent o nore (who has been or wil of purchasers in cor f a broker or dealer than five (5) person for that broker or d	nnection registes s to be	on with s tered with tisted ar	ales of secu h the SEC a	rities ir and/or	the offer with a stat	ing. I e or	f a	
	e (Last name	first, if	individ	dual)										
		111 31, 11												
Business	or Residence	Address	s (Nun	ber and St	reet, (City, State, Zip Cod	le)	_						
Name of	Associated Br	oker or	Deale	r										
						ds to Solicit Purcha] All Sta	ates					
[AL]	[AK]	[AZ]	[A	.R] [C	[A]	[CO] [CT]	1	{DE}	[DC]	[FL]	[G/	4]	[HI]	[ID]
[IL]	[IN]	[IA]	[K	(S) [K	[Y]	[LA] [ME	3	[MD]	[MA]	[MI]	[M	N]	[MS]	[MO]
[MT]	[NE]	[NV]	[N	iH] [N	J]	[NM] [NY]	l	[NC]	[ND]	Ю] [0]	K]	[OR]	[PA]
[RI]	[SC]	[SD]	[]	[T	X]	[UT] [VT]		[VA]	[WA]	[WV] [W	IJ	[WY]	[PR]
Full Nam	e (Last name	first, if	individ	iual)										
Business	or Residence	Address	s (Num	ber and St	reet, (City, State, Zip Cod	le)							
	Associated Br					•								

States in	Which Pers	on Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers	5	<u>-</u> -		·			
(Check '	'All States"	or check i	ndividual S	States)	• • • • • • • • •] All States	S					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[R1]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Nam	e (Last nan	ne first, if i	ndividual)										
Business	or Residenc	e Address	(Number a	nd Street, (City, State,	Zip Code)			. -				
Name of A	Associated 1	Broker or l	Dealer										
States in	Which Pers	on Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers	<u> </u>						
(Check '	'All States"	or check i	ndividual S	States)] All States	i					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
-			(Us	e blank she	et, or copy	and use add	litional cop	ies of this s	heet, as nec	essary.)			
			C. OFFERI	NG PRICE	, NUMBER	OF INVE	STORS, EX	(PENSES A	AND USE (OF PROCE	EDS		
if answer	r is "none"	or "zero."	If the tran	saction is a		offering, cl	and the tota neck this bo nged.						
Туре	of Security	,									Offering	ate Amo Price	ount Already Sold
Debt	• • • • • • • • • • • • • • • • • • • •										<u>\$ 0</u>	<u> </u>	0
Equi	ty	······	• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •					<u>\$ 0</u>	\$	0
				[] Com	mon {] Preferre	d						
Conv	ertible Seco	urities (inc	luding war	rants)	• • • • • • • • • •	•••••	•••••	•••••	••••••	• • • • • • • • • •	<u>\$ 0</u>	\$	0
Parti	iership Inte	erests	••••••	• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••	•••••		•••••		<u>\$ 760,00</u>	0 \$ 70	<u> 60,000</u>
Othe	r (Specify_				 		•••••		•••••		<u>\$ 0</u>	\$	0
Total											\$ 760 0 0	.n	co ooo
1 (1)131											> /DII 41/1		

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number of Investors	Aggregate Dollar Amoun of Purchases
Accredited Investors	12	\$ 760,000
Non-accredited Investors	. <u>N/A</u>	<u>\$ 0</u>
Total (for filings under Rule 504 only)	·	\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505	. <u>N/A</u>	<u>\$ N/A</u>
	N/A	_\$ N/A
Regulation A		_5 N/A_
Rule 504	N/A	\$ N/A
Total	N/A	_\$ N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		. 🛭 \$
Printing and Engraving Costs		[X] <u>\$5,000.00</u>
Legal Fees	• • • • • • • • • • • • • • • • • • • •	. [X] <u>\$10,000.0</u>
Accounting Fees		[X] \$5 <u>,000.00</u>
Engineering Fees		🗆 \$
Sales Commissions (specify finders' fees separately)	,	🗆 \$
Other Expenses (identify)		[]\$
		· ·
Total		. [X] \$ 20,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price expenses furnished in response to Part C - Question 4.a. Th issuer."			\$ 740,000
5. Indicate below the amount of the adjusted gross proceeds a purposes shown. If the amount for any purpose is not known estimate. The total of the payments listed must equal the adjuPart C - Question 4.b above.	n, furnish an estimate and check the box to the left of the	Payments Officers, Directors Affiliates	s, &
Salaries and fees (Development & Organizational Fees)		() \$ <u>76,000</u>	[]\$_0
Purchase of real estate (via investment in another partnershi	ip) []] \$	[]\$_0
Purchase, rental or leasing and installation of machinery and Construction or leasing of plant buildings and facilities	d equipment]\$	_ []\$_0 _ []\$_0
Acquisition of other businesses (including the value of securimay be used in exchange for the assets or securities of anothe Repayment of indebtedness	ities involved in this offering that er issuer pursuant to a merger)	[]\$ <u>0</u> []\$ <u>0</u>	[]\$0 []\$0
Working capital] \$0	[X] \$ <u>664,000</u>
Other (specify):	[[]\$0]\$0	_ []\$ _ []\$0
Column Totals	[x	(] \$ <u>76,000</u>	[X] \$ <u>664,000</u>
Total Payments Listed (column totals added)		[X	740,000
	D. FEDERAL SIGNATURE		
Rule 505, the following signature constitutes an undertaking	dersigned duly authorized person. If this notice is filed under by the issuer to furnish to the U.S. Securities and Exchange Con-accredited investor pursuant to paragraph (b)(2) of Rule 502		pon written request
Issuer (Print or Type)	Signature	Date	
VALQUEST PARTNERS BATON ROUGE, L.P.	fame to looods of	8-	6-02
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
James B. Woods, IR	Managing Partner of ValQuest Equity Partners	, General P	Partner to
cones	Issuer		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations, (See 18 U.S.C. 1001.)

Intentional misstatements or omissions	of fact constitute federal criminal violations. (See 18 U.S	s.C. 1001.)
<u> </u>	E. STATE SIGNATURE	
1. Is any party described in 17 CFR 230.262 presently subject provisions of such rule?	to any of the disqualification	Yes[] No[X]
See Ap	ppendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes to furnish to any 239,500) at such times as required by state law.	state administrator of any state in which this notice is filed, a noti	ice on Form D (17 CFR
3. The undersigned issuer hereby undertakes to furnish to the	state administrators, upon written request, information furnished	by the issuer to offerees.
	with the conditions that must be satisfied to be entitled to the Unid understands that the issuer claiming the availability of this exem	
The issuer has read this notification and knows the contents to authorized person.	be true and has duly caused this notice to be signed on its behalf	by the undersigned duly
Issuer (Print or Type)	Signature	Date
VALQUEST PARTNERS BATON ROUGE, L.P.	James & woods &	8-6-02
Name of Signer (Print or Type)	Title (Print or Type)	
James B. Woods, Ir.	Managing Partner of ValQuest Equity Partners, C	General Partner to

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

- 1				AP	PENDIX			s irani		
1		2	3			4			5	
	to non-a investor	d to sell accredited is in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount pi (Par	f investor and urchased in State t C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ								<u> </u>		
		_								
AR					.			ļ ———		
CA CO		 						<u> </u>		
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State Ves No According to Manual Processors Amount Investors No manufactoris Amount Investors Ves No MT I										5	
MT NE NV NV NI NJ NJ NM NY NC NC ND OR R R R R R R R R T X Y P T T X X P T T T X X P T T T T X X R T T T X X R T T T T T T T		Intended to non-a investor (Part B	d to sell	Type of security and aggregate offering price offered in state (Part C-Item		Type o amount po (Par	f investor and urchased in State t C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
NE	State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No	
NY	МТ										
NH NJ NM NY NY NC ND	NE										
NJ NM NY NY NC ND	NV										
NM	NH										
NY	NJ										
NC	NM										
ND	NY										
OH OK OK OR	NC			_			_				
OK	ND							·· -			
OR PA RI SC SD STO TN X Partnership Interest 12 VT VI VA VA WI WI WY WI	ОН										
RI	ок										
RJ SC SC SD SD SD SD SD SD STO SD STO SD S	OR							-			
SC SD SD SD ST ST ST ST ST	PA										
SD	RJ										
TN	sc										
TX	SD			-						-	
UT VT	TN										
VT VA WA WV WI WY	TX		X	\$760,000 Partnership Interest	12	\$760,000	0	0		Х	
VA	UT										
WA WY	VT		<u> </u>					<u> </u>			
WY WI WY WY	VA										
WI WY	WA										
WY WY	wv										
	WI										
PR PR	WY										
	PR										